JUDICIAL CANDIDATE / OFFICEHOLDER

FORM JC/OH

CAMPAIGN F	INANCE REPORT	7033	COVER SHEET PG 1
The JC/OH Instruction G	UIDE explains how to complete this form.	1 ACCOUNT # (Ethics Commission filers) 00062281	2 PAGE # 1 of 4
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST Mrs. Melissa NICKNAME LAST Goodwin	MI	OFFICE USE ONLY Date Received
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX; APT / SUITE #; 401 W. 15th Street, Suite 850 Austin, TX 78701	CITY; STATE; ZIP CODE	Date Hand-of-Worked or Date Postmarked
5 CAMPAIGN	MS / MRS / MR FIRST	MI	Receipt # Amount Date Processed
TREASURER NAME	Mrs. Donna Nickname Last Garcia Davidson		Date Imaged
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SU 401 W. 15th St., Suite 850 Austin, TX 78701	JITE#; CITY; STATE;	ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (512) 469-7474	EXTENSION	
8 REPORT TYPE	X January 15 30th day before elect		15th day after campaign treasurer appointment (officeholder only) Final report (Attach C/OH - FR)
9 PERIOD COVERED	Month Day Year THRO	Month Day DUGH 12/31/20	Year
10 ELECTION	Month Day Year ELECTION TO Prima	.—	General Special
11 OFFICE	OFFICE HELD (if any) District Judge District 427	12 OFFICE SOUGHT (if known) District Judge District	xt 427
13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE	Direct campaign expenditures are campaign ex Candidates are required to disclose this information		
BY OTHER INDIVIDUALS	Name		
additional pages	Address/PO Box; Apt. / Suite #; City; State;	Zip Code	
	GO TO	PAGE 2	

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: **SUPPORT & TOTALS**

FORM JC/OH COVER SHEET PG 2

(512)463-5800

14 C/OH NAME Good	win, Melissa (Mrs.))	15 ACCOUNT # (00062281	Ethics Commission filers)		
16 NOTICE FROM	This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures					
POLITICAL COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME				
	GENERAL					
	SPECIFIC	CIFIC COMMITTEE CAMPAIGN TREASURER NAME				
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS				
		<u> </u>	1			
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00		
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	500.00		
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED			93.00		
	4. TOTAL POLITICAL EXPENDITURES			4,253.66		
CONTRIBUTION BALANCE	5. TOTAL 1 LAST D	\$	6,022.44			
OUTSTANDING LOAN TOTALS	6. TOTAL I LAST D	\$	0.00			
18 AFFIDAVIT						
- Marian and A		I swear, or affirm, under penalty is true and correct and includes me under Title 15, Election Coo	all information require			
	Marti Asher Notary Public, State of Tes My Commission Expires August 20, 2010		Candidate or Officehol	der		
AFFIX NOTARY S	STAMP / SEAL ABO\	/E		· 		
Sworn to and subscrib	_	he said Melissa Boodwin	, this the	14th day		
of Kamary, 2	20 <u><i>09</i> </u>	rtify which, witness my hand and seal of office.	,			
Marti la Signature of officer admi	their north	MARTI ASHER Print name of officer administering oath	Motate Title of officer adm	nistering oath		
organization of Officer autili	motering caus	, the harmon difficulty data	C. Cinoci adiyyi			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

Austin, Texas 78711-2070

SCHEDULE A (J)

	The Instruction Guide explains how to complete this form.			1 PAGE#				
The Instruction Guide explains now to complete this form.			Schedule: 1/1 Report: 3/4					
2	2 FILER NAME Goodwin, Melissa (Mrs.)			3 ACCOUNT # (Ethics Commission filers)				
	·				00062281			
4	4 Date 5 Full name of contributor out-of-state PAC (ID#) Caine, Robert			7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)			
	10/29/2008 6 Contributor address; City; State; Zip Code P.O. Box 92495 Austin, TX 78709-2495		\$500.00	1 I 1 · · ·				
					(If travel outside of	Texas, complete Schedule T)	ı	
9	Contributor's pattorney	I principal occupation	10	Contributor's job attorney	<u> </u>	,	_	
11	Contributor's e	employer / law firm	12	Law firm of conti	ributor's spouse (if ar	ny)	_	
13	If contributor is	s a child, law firm of parent(s) (if any)	<u> </u>				4	
							_	
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Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 (512)463-5800 1-800-325-8506 **POLITICAL EXPENDITURES** SCHEDULE F 1 PAGE# The INSTRUCTION GUIDE explains how to complete this form. Schedule: 1/1 Report: 4/4 (Ethics Commission filers) 2 FILER NAME Goodwin, Melissa (Mrs.) 3 ACCOUNT# 00062281 Date Payee name Amount **AM Productions** (\$) 11/15/2008 \$4,010.66 6 Payee address; City; State; Zip Code 7202 Smokey Hill Rd. Austin, TX 78736 9 . Complete if direct expenditure to benefit Candidate/Officeholder .. Purpose of payment (See instructions regarding type of information Candidate / Officeholder name: required.) printing Office sought: (If travel outside of Texas, complete Schedule T) Office held: Date Payee name Amount Third Base Bar & Grill (\$) 11/03/2008 \$150.00 City; State; Zip Code Payee address; 1717 W. 6th St. Austin, TX 78703 Purpose of payment (See instructions regarding type of information ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: required.) Election night food Office sought: (If travel outside of Texas, complete Schedule T) Office held: